	M	ULTIPI	LE DE	NDE	NT CL	AIM		SERIAL	NO.						
1	MULTIPLE DE NOENT CLAIM FEE CALCULATION SHEET								FILING DATE						
	(FOR USE WITH FORM PTO-875)								INT(S)	7/1	151	14/	70		
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PTO-DO (BEV. 11A)		11.				L	LAMOS		PETARTH	ENT of COM					
								Per	cal and Trad	omark Office	~LKCE				